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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/251,473 09/20/2002
 which is a CON of 09/860,979 05/18/2001 PAT 6,478,737
 which is a CON of 09/686,712 10/10/2000 PAT 6,331,160
 which is a CON of 09/361,777 07/26/1999 PAT 6,203,495
 which is a CIP of 09/324,894 06/03/1999 PAT 6,312,378

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/12/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	WA	21	19	3
Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

System and method for providing feedback to an individual patient for automated remote patient care

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